

California State Journal of Medicine.

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EDITORIAL NOTES.

Most remarkable, in more ways than one or two, was the International Tuberculosis Congress held in Washington during the closing days of September and the early days of October. The daily press has had quite a little to say of it—particularly of those things which seemed to present some sensational features. But where is the publication that has uttered a single word concerning the most significant phase of the whole Congress? One of the very first speakers asserted, after due and careful study, that tuberculosis cost this country a billion dollars annually; that 138,000 persons died of this disease alone, each year. Now those 138,000 persons must have had some medical attendant and most of them must have paid no small sum to the medical profession during the course of the disease. Not a trifle, by any means. Furthermore, it is a matter of long observation that at least one person in ten has tuberculosis at some time in his life and probably that proportion of people, the world over, die of it. And yet, we see physicians from all parts of the world gather in Washington to the number of probably nearly 5,000 and there discuss enthusiastically the most recent discoveries and methods that will tend to stamp out the disease. The wonderful altruism of modern medicine passes recognition by the press. Can one imagine the Steel Trust devoting its energies to showing the people how to get along without steel? Can imag-

ination picture an aggregation of lawyers assembled to devise ways and methods by means of which litigation and the law's delays may be decreased? May one even picture an assemblage of clergymen perfecting a plan for universal salvation—without the necessity for supporting the churches? But the Tuberculosis Congress was the expression of the international effort of a single profession to cut off one-tenth of its income! In spite of which the people do not understand and are suspicious of our every effort. What is there about the medical profession that seems to put it so far beyond the understanding of the people that they will not see the truth? What is the matter with the editors of our lay publications, many of them men of remarkable intellect, that they fail to see the tremendous significance of such a gathering as the International Tuberculosis Congress? The assertion is made, apparently on good authority, that since 1880 the span of life has been increased six years. Has our profession, then, done nothing for humanity? And yet there are doubtless those who would say that the doctors keep 'em alive longer in order to treat 'em longer and so get more money! Ye Gods and little fishes!

At this time and distance it is not possible to review the very large amount of work accomplished at the Congress. Koch seems to have received a tremendous ovation, a reception only a trifle less marked having been extended to the other luminosities of the tuberculous heavens. Battle seems to have raged over the much-fought question of the identity or dissimilarity of human and bovine tuberculosis, with, apparently, the same old result—a difference of opinion. Great interest was evidently manifested in the newer diagnostic aids, the conjunctival and skin reactions, and doubtless in a short time we shall have items of great interest on these subjects presented for our consideration. The attendance was much larger than had been anticipated, some reports placing it at not less than 5,000. Our own State was well represented, some fifteen or twenty of our members having been present. One thing is certain; there is no more doubt as to the great interest in and value of these international congresses.

If one takes a dispassionate birdseye view of certain present conditions in American medical life, he will receive a distinct shock. Let us assume—and the assumption will be near enough the fact—that there are in the United States 125,000 physicians and 250 medical journals. All of these journals are, supposedly, published for the benefit and in the interest of physicians. Hovering hungrily on the flanks of this band of 125,000 physicians, ninety-nine and a fraction per cent of whom are in no sense of the word business men—rather the reverse—we may observe another band, not of the medical profession (except in rare instances) but

**IS IT
DOLLARS?**

cases into six divisions, placing them in what I consider the order of importance.

1st. Accurate measurement of refraction under atropine. This, of course, presupposes expertness in the use of the retinoscope, this being the only means at our command for use in young children.

2d. Constant wearing of the full refractive correction.

3d. Occlusion of the good or fixing eye. This may be accomplished by the use of atropine, or, a method which I prefer, by taking a pair of light automobile goggles and putting a ground or black glass in front of the good eye with the proper correcting lens mounted in front of the squinting eye. The child is prevented from looking over or to the side of the occluded glass by coating the wire sieve framework with shellac. A few pinholes must be punched through for ventilation purposes. Vision in the squinting eye will improve much more rapidly if we make no compromises with the child or with indulgent parents, but firmly insist that these glasses be worn constantly.

4th. The use of the amblyoscope of Claud Worth. I use the modification of the original make suggested by Black of Milwaukee. I would here urge the unwisdom of allowing parents to undertake these exercises at home, for invariably they fail to execute them properly. The results are nil, and by the fruits of their own efforts they are likely to estimate the good that follows as a reward of effort in more skillful hands. When by the use of the amblyoscope I have first stimulated simultaneous muscular perception, from this point progressed to the fusion of the two halves of a picture into a composite one, and so elicited a feeble sense of perspective, and if in addition to this I can by use of the cover test or with red or green glass in front of the eyes elicit diplopia, I feel that the case is well in hand, and with the co-operation of the child's parents I can almost certainly promise an ultimate cure.

5th. In the further treatment of these cases, I urge that the child be taught simple perspective drawing and that the child practice mental drawing of geometrical figures. This is an exercise that is frequently done in beginning art classes. Take some solid geometrical figure, as a cube, pyramid, rectangle, etc., put the figure on a chair or table some distance from the child, have him take a pencil in hand and trace out in space in front of him the directions of the lines and planes that make up the figure, doing this first with the right and then with the left hand. I have never seen this particular exercise mentioned in any text book or monograph on the treatment of squint, but I presume, though unmentioned, it is commonly used.

6th. The sixth and last step in the treatment of squint is the operative interference. This has purposely been placed last because a majority of cases can be cured without the aid of surgery, and it is sensible that this step be postponed until all other means fail. I do not in the least underrate the merit of muscular correction in the properly selected cases. To be a bit paradoxical, these selected cases

are those never selected for any kind of treatment, they are the result of someone's indifference or blunder. The eye is already blind from disuse, hence the prescribing of glasses to correct the refractive error and the effort to stimulate muscular perception are alike useless. In these cases surgery is of avail, yet even here it has its limitations. The most fortunate result is only a cosmetic one and even if happily the eye is put straight, and yet more happily, if, in the absence of vision, it remains so, after all the eye is as blind as ever and as useless as before the deformity was corrected. Abnormalities in the orbits and in muscular origin and insertion most certainly exist, and in these cases it will ultimately be necessary to operate to obtain desired results. But even in these cases means must be first taken to conserve good vision in the squinting eye and fusion must be awakened and stimulated to the maximum. When it is proved that the desire for fusion and binocular vision can not overcome the anatomical defect then we may wisely consider the advisability of operative interference, for with the visual function and fusion in the amblyoscope well established, we can rest in the assurance that nature will come to our aid. If now we more or less satisfactorily correct the deviation, nature will begin where the surgeon leaves off, and by its insistence on the stimulation of corresponding retinal points bring the eyes into perfect parallelism.

SOME THINGS TO REMEMBER.

The State Journal and the State Society have now offices in the Butler Building, Geary and Stockton Streets, San Francisco.

The State Medical Society meets in San Jose, April 20, 21 and 22, 1909.

The A. M. A. meets in Atlantic City, June 8-11, 1909.

SAN JOAQUIN COUNTY ON NOSTRUMS.

Stockton, Cal., September, 1908.

To the Physicians and Surgeons of San Joaquin County:

Dear Doctors—There has been a special committee appointed by the San Joaquin County Medical Society to look into the abuses arising out of the use of proprietary medicines. These abuses are many and affect not only the physician, but the druggist and people at large as well. They affect the doctor in many ways.

First. He becomes lazy as to prescribing the medicines according to the national formulary.

Second. He compels the druggist to load his shelves with a lot of medicines easily compounded by any intelligent pharmacist.

Third. The druggist having these articles on his shelves, it is easy, in many instances, to prescribe over the counter to many people who would otherwise consult the doctor.

Fourth. An intelligent person who reads the prescriptions the doctor writes before presenting them to the druggist for filling, in many instances, become familiar with the name of this special preparation prescribed, and instead of handing in his prescription, will ask for this preparation of the druggist, thereby getting the original package containing all the literature, dosage and other information connected with the medicine.

Fifth. The doctor, in his effort to dispose of these preparations, becomes an active selling agent for the proprietary medicine concern, and while it reduces his own profits in the business, aids these people to

This subject of the economic value to the country of a general raising of the average health came up in the Governors' Conference at the White House in May. Dr. George M. Kober, in his speech on the "Conservation of Life and Health by Improved Water Supply" at the Conference presented figures which showed that the decrease in the "vital assets" of the country through typhoid fever in a single year is more than \$350,000,000. Typhoid is spread by polluted water largely so that the death rate from this disease can be directly reduced by the purification of city drinking water. Dr. Kober quoted statistics to show that the increased value of the water to the city of Albany, where the typhoid fever rate was reduced from 104 in 100,000 to 26 by an efficient filtration plant, amounts to \$475,000 a year, of which \$350,000 may be considered a real increase to the vital assets of the city. Census Bureau figures show that the average annual death rate from typhoid in cities with contaminated water supplies was reduced from 69.4 per 100,000 to 19.8 by the substitution of pure supplies.

Dr. Kober cited estimates showing that the average length of human life in the sixteenth century was between 18 and 20 years, and that at the close of the eighteenth century it was a little more than 30, while to-day it is between 38 and 40; indeed, the span of life since 1880 has been lengthened about six years.

INFORMATION FOR MEDICAL STUDENTS. From the Board of Medical Examiners.

Your careful attention is called to the requirements of the medical laws of California. Before an applicant can be permitted to take the examinations, he must present documentary evidence that he has graduated from a medical school, the requirements of which shall have been, at the time of granting such diploma, in no particular less than those prescribed by the Association of American Medical Colleges for that year.

The Association of American Medical Colleges requires, since 1905:

I. Before a student can enter upon his medical training, he must offer as a minimum requirement for admission, either:

(a) A Bachelor's Degree from an approved college or university; or

(b) A diploma from a university accredited high school, embracing not less than four years' study in the subjects required by the Association; or

(c) An examination in these subjects, as designated by the Association, totaling not less than thirty points;

(d) A certificate from examiners recognized by the State Board of Medical Examiners, viz: for Southern California, Miss Gertrude Henderson, Los Angeles; for San Francisco and vicinity, Prof. Harry Beal Torrey, Berkeley.

II. A student may be allowed to enter on his medical work conditioned in not more than six points, but these conditions must be removed by satisfactory examinations before he is allowed to enter on the second year of his medical course. A student entering college with certificates other than those granted by the Board's recognized examiners, or entering upon his second year with matriculation conditions, is debarred for all time from taking the State Board examinations.

III. The curriculum of the medical school must include the subjects stated in the schedule of requirements of the Association of American Medical Colleges, and such subjects must be pursued the length of time therein stated.

Graduates in medicine have been refused the privilege of taking the examinations, because they had

not fulfilled the requirements of the Association. To prevent such a difficulty, your attention is particularly called to the requirements of the State law.

- A. Required, 16 points. Minimum.
- | | |
|--|----------|
| Mathematics (minimum, two years; maximum, three years), Algebra and Plain Geometry | 4 Points |
| English (minimum, two years; maximum, four years) | 4 |
| (a) English Grammar. | |
| (b) Rhetoric and Composition. | |
| Latin (minimum, two years; maximum, four years) | 4 |
| (a) Latin Grammar. | |
| (b) Latin Prose Composition. | |
| (c) Reading four books of Caesar or equivalent. | |
| Physics (one year) with laboratory work | 2 |
| History (one year), including Civics and Political Economy | 2 |
- B. Elective, 14 points.
- | | |
|--|---|
| English Language and Literature (two years). Only if taken after the required English | 4 |
| Language—German, French, Spanish or Greek (four years). Not less than one year in any one | 2 |
| Advanced Mathematics—Solid Geometry and Trigonometry (one-half year each) | 1 |
| Natural Science (one year), Biology (one year), or Botany and Zoology (one-half year each) | 2 |
| Physical Science (one year), Chemistry. | 2 |
| Earth Science—Physical Geography and Geology (one-half year each) | 1 |
| Physiology and Hygiene (one-half year) | 1 |
| Astronomy (one-half year) | 1 |
| Drawing (one-half year) | 1 |

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San Francisco.

ADDITIONS TO NEW AND NON-OFFICIAL REMEDIES.

To the list of articles accepted by the Council, which will appear in the Journal October 3, there have been added the following:

- Panase (F. Stearns & Co.).
Panase Essence (F. Stearns & Co.).
Panase Tablets (F. Stearns & Co.).
Hemaboloids (Palisade Manufacturing Co.).
Spirosal (Farbenfabriken of Elberfeld Co.).
Gr. Eff. Bromide and Acetanilid Comp. (H. K. Mulford Co.).
Gr. Eff. Caffeine and Sodium Comp. (H. K. Mulford Co.).
Gr. Eff. Carlsbad Salt (Artificial) with Phenolphthalein (H. K. Mulford Co.).
Adrin Sol. 1:500 (H. K. Mulford Co.).
Adrin Tablets 1-65 gr. (H. K. Mulford Co.).
Adrin Tablets 1-100 gr. (H. K. Mulford Co.).
Adrin Tablets 1-200 gr. (H. K. Mulford Co.).
Adrin and Cocaine Hydrochl. Tabl. (H. K. Mulford Co.).
Adrin and Sparteine Sulphate (H. K. Mulford Co.).
Adrin Ointment (H. K. Mulford Co.).
Adrin Suppositories (H. K. Mulford Co.).
Adrin Comp. Vaginal Suppos. (H. K. Mulford Co.).

From the former list, Ichthyolum Austriacum has been omitted, and at the request of the manufacturer the title "Diabetin" has been changed to "Levulose, Schering."

author has managed to give a deal of information about an interesting class of our profession, for these sons of Belial are of our profession, as engaged in healing the sick with drugs and otherwise. The most interesting chapter in the book is the one entitled "The Advertising Specialist's Guarantee," in which the author describes the different documents of a financially reassuring nature, given by charlatans to their patients. It shows quite clearly that when two men enter into a contract the advantage lies with the man who has studied out his plan of action, and has had practical experience. The novice is at the mercy of the initiated.

Another thing pretty clearly demonstrated is that the advertising specialist has his troubles too, and that the regular practitioner, following along the beaten path of professional life, has probably much less worry, more honor, and almost always more remuneration than his more showy but erring brother. Now comes the question: Is it worth while to study charlatans with a view to copying any of their methods? It is not. Their ways are not our ways, and never can be, and that is the main reason for keeping aloof from them. Those therefore who would buy the book with a view to getting anything helpful to their practice out of it, will find a disparity between the amount of money expended and the practical benefits received. D. M.

Contributions to the Science of Medicine and Surgery by the Faculty in Celebration of the Twenty-fifth Anniversary—1882-1907—of the Founding of the New York Post-Graduate Medical School and Hospital, 1908.

The 485 pages, to which the title of Contributions is given, contain 48 articles relating to medicine, surgery and allied branches. The great majority of said articles are faithful reproductions of the sterile short-cut methods which characterize the teaching offered the ticket purchasers at the New York Post-Graduate School. In the midst, however, of incomplete and useless case histories, a few points of interest may be gleaned. The recent graduate may read with profit the article by Beaumont Douglass, who enumerates at great length the disadvantages of post-graduate study in foreign lands where one "is in constant turmoil and confusion"; whilst "the real, earnest and enthusiastic work and development of technique can be done best in the post-graduate schools of the United States."

De Garmo's article on bladder wounds in hernia operations contains interesting data. Warren Plimpton's dissertation on the correction of deformities following Pott's fracture is well written and richly illustrated with appropriate radiograms.

In a brief article entitled "a reminder that fatal or serious results may follow operative treatment of buboes," Eugene Fuller reports several fatal cases illustrative of the dangers attending the use of the curette.

By far the best article of the entire volume is by one unconnected with the Post-Graduate School, Sidney Jacobson, who, in reporting the microscopical findings of a case of true primary ovarian pregnancy, makes a most thorough review of the literature of the subject.

Nursing the Insane. By Clara Barrus, M. D., Woman Assistant in the Middletown State Homeopathic Hospital, New York. The Macmillan Company, New York, 1908.

Institutions for the insane have within the last decade undergone striking and important changes. For years merely regarded as places of detention and custody, they have evolved into modern hospitals, which aim to provide, not only comfortable and hygienic surroundings, but scientific treatment directed to the amelioration and sometimes the cure of the mental conditions. The advances made in handling

insane patients lie largely in the perfecting of the nursing; and that the training of nurses and attendants for this class of patients covers a much wider field than that of the ordinary trained nurse is quite evident. "She must safeguard them from injuring themselves or others, must possess many of the qualities that make a good teacher, since a part of her duty is to help correct faults in early training and development, and to encourage and train to correct and useful and proper behavior; she has also to employ and entertain her patients, under the direction of the medical officers; and to her is entrusted that almost constant association and companionship which, if sympathetic and judicious, is one of the most potent means of restoring her charges to mental health." It has, therefore, been apparent to those connected with the administration of insane asylums, that a text-book containing the essential points of such nursing has long been desirable. In this book we find the special instructions required, together with naturally the essentials of ordinary nursing. We unhesitatingly recommend the perusal of it to all classes of nurses, as well as physicians in touch with insane patients. A. J. L.

DEATH OF MRS. WILLS.

The death is announced at Los Angeles of Mrs. Charlotte Le Moyne Wills, mother of Dr. Wm. Le Moyne Wills, who was for many years one of the best known residents of Los Angeles; prominent there in philanthropy, as a woman suffragist, and as one of the founders of the Friday Morning Club. Mrs. Wills was the daughter of Dr. Julius Le Moyne, who introduced cremation into the United States, he having built the first crematory in this country in 1876, at Washington, Pennsylvania. Mrs. Wills shared the views of her father and was instrumental in having built in Los Angeles the Rosedale Crematory, which was constructed in 1887. Until age and illness practically confined her to her home, Mrs. Wills was actively engaged in the social and philanthropic work for which she was noted, and few medical men of California have been to Los Angeles without meeting her. But few of them probably knew that, by her successful advocacy of cremation, she was a practical coworker of theirs in sanitation.

CHANGE OF ADDRESS.

Parsons, E. W., from 2580 Mission st., to 2597 Mission st., San Francisco.

Wemple, Emmett L. R., from 1059 O'Farrell st., to 240 Stockton st., (Schroth Bldg.) San Francisco.

Salomon, Max, from 1059 O'Farrell st., to 240 Stockton st., (Schroth Bldg.) San Francisco.

Weis, Arthur H., from 1546 Ellis to 16th and Mission, San Francisco.

Frederick, M. W., from 2152 Sutter to 135 Stockton st., (Butler Bldg.) San Francisco.

Horstmann, E. H., from Los Angeles to German Hospital, San Francisco.

McCarthy, Isaac A., from Union Trust Bldg., Los Angeles, to 1264 W. Adam st., Los Angeles.

Bock, Chas., from 703½ Central ave., Los Angeles, to Palms Springs Sta., Riverside County, Cal.

Avery, Ralph W., from 1005 Fair Oaks ave., So. Pasadena, to Alexander Bldg., So. Pasadena.

Griffin, Chas. Francis, from 3144 24th st., to 2804 Folsom st., S. F.

Watt, Fred W., from Pinogrande, El Dorado Co., to Morgan Hill, Santa Clara Co., Cal.

Baker, Clarence C., from 2186 Bush st., to 1028 Market st., San Francisco.

Titchworth, Jas. C., from 2980 Bush st., to Sherwood, Cal.

French, J. Rollin, from 526 St. Louis st., Los Angeles, to Spinks Bldg., 5th and Hill sts., Los Angeles, Cal.

Hindman, S. J., from Moneta and Slauson aves., to 55 Moneta ave., Los Angeles.

Allen, Chas. Lewis, from San Fernando Bldg., Los Angeles, to Pacific Electric Bldg., Los Angeles.

Dudley, Wm. H., from H. W. Hellman Bldg., Los Angeles, to Pacific Mutual Ins. Bldg., Los Angeles, Cal.

Moore, Will H., from San Diego, Cal., to Sykeston, North Dakota.

Pope, Fred'k S., of San Jose, Cal., traveling abroad.

Gedney, Fred'k M., from 1696 Sutter st., to 304 Clement st., San Francisco.

Wright, Fred'k L., from 1169 Broadway, Oakland, to 1155 Broadway, Oakland.

Smith, Dudley A., from 1111 Washington st., Oakland, to Union Sav. Bank Bldg., Oakland, Cal.

Lilientcrantz, A., from 359 Telegraph ave., Oakland, to First Nat'l Bank Bldg., Oakland, Cal.

Irwin, W. H., from Macdonough Bldg., to First National Bank Bldg., Oakland.

Hadden, David, from 2716 Telegraph ave., Oakland, to Wright Bldg., Berkeley, Cal.

Hector, Robert, from 1908 Shattuck ave., Berkeley, to Wright Bldg., Berkeley.

Reinstein, Arthur H., from 2597 Sacramento st., San Francisco, to Veterans' Home, Napa, Cal.

Rice, Weston H., from 577 Telegraph ave., to 229 Telegraph ave., Oakland, Cal.

Sutherland, Hester M., from 2605 Ashby ave., Berkeley, to Fabiola Hospital, Oakland, Cal.

Carlson, Chas. H., from 1823 Geary st., to Union Square Bldg., 350 Post st.

Mace, Lewis S., from 1059 O'Farrell st., to Schroth Bldg., 240 Stockton Bldg., San Francisco.

Chipman, Ernest, from 2400 Pacific ave., to Schroth Bldg., 240 Stockton st., San Francisco.

Minaker, Andrew J., from 1278 Market st., to 146 Grant ave., California Optical Bldg., San Francisco.

West, Jacob H., from Black Diamond, Cal., to Bank of San Jose Bldg., San Jose, Cal.

Arbogast, J. L., from St. Helena, Cal., to 719½ K st., Sacramento, Cal.

Bennett, Laura B., from San Pedro, Cal., to Wright & Callender Bldg., Los Angeles, Cal.

Kress, Geo. H., from the Johnson Bldg., Los Angeles, to Bradbury Bldg., Los Angeles.

Chapline, Frank L., from Los Angeles, to Orange, Cal.

Roth, Leon J., abroad for a year.

E. Myrtle Wellcome-de Blois, from 1329 So. Grand ave., Los Angeles, Cal., to Brawley, Imperial Co., Cal.

Powers, Geo. H., from 1214 Polk st., to 111 Ellis st., (Powell Bldg.) San Francisco.

Hoffman, Lawrence H., from 3014 Washington st., to Butler Bldg., (135 Stockton st.) San Francisco, Cal.

Baker, Wood C., from address unknown, to San Mateo, Cal.

Beasley, M. E., from address unknown to Vista Grande, San Mateo Co., Cal.

Schulze, Otto T., from U. C. Hospital, San Francisco, to Veterans' Home, Napa, Cal.

Bulson, Chas. H., from Ochener Bldg., Sacramento, to Veterans' Home, Napa, Cal.

Duncan, Franklin T., from Sutter and Webster sts., San Francisco, to 1353 Broadway, Oakland.

Mauzy, Wm. Peter, from 654 14th st., Oakland, to 570 Williams st., Oakland.

Morse, Fred W., from 1204 Harrison st., Oakland, Cal., to Oakland Sav. Bank Bldg., Oakland.

Northcott, E., from 3028 E. 17th st., to 3116 E. 14th, Oakland.

Bishop, Simeon from address unknown, to 3rd ave., and Clement sts., San Francisco, Cal.

Deane, Tenison from address unknown, to Ukiah, Cal.

Freedman, Chas., from address unknown, to Redondo, Cal.

Gardner, J. F., from address unknown, to 1204 Railroad ave., San Francisco.

Grissim, Jno. De L., from address unknown, to 1111 Washington st., Oakland, Cal.

McCue, Jas. E., from address unknown, to Central Bank Bldg., Oakland, Cal.

Owen, G. R., from address unknown, to San Bernardino, Cal.

Pyle, F. S., from address unknown, to Valencia and 22d st., San Francisco, Cal.

Powell, Thomas, from southwest corner 8th and Hope sts., Los Angeles, to Columbia Trust Co. Bldg., Los Angeles, Cal.

Mosher, Clelia Duel, from 1100 Bryanti st., Palo Alto, to 1094 Emerson st., Palo Alto, Cal.

Day, Robert V., from Bradbury Bldg., Los Angeles, to Lissner Bldg., Los Angeles, Cal.

Creamer, M. S., from 3146 Vermont st., Los Angeles, to 501 Homer-Laughlin Bldg., Los Angeles.

Stafford, Owen R., from 4206 Vermont ave., Los Angeles, to 3754 Vermont ave., Los Angeles, Cal.

Spalding, Alfred Baker, from 2510 Washington st., San Francisco, to 240 Stockton st., (Schroth Bldg.) San Francisco.

New Members.

Scheuer, G. A. J., Guerneville, Cal.

Force, J. N., 3223 College avenue, Berkeley, Cal.

Bingaman, Elmer W., Soledad, Cal.

Reynolds, Geo. E., Haywards, Cal.

Smith, Arthur M., 876 Adeline St., Oakland, Cal.

Mays, Wm. H., First Nat'l Bank Bldg., Oakland, Cal.

Grissim, Jno. De L., 1111 Washington St., Oakland, Cal.

Bixby, W. E., Union Sav. Bank Bldg., Oakland, Cal.

McClurg, Katherine, Union Sav. Bank Bldg., Oakland, Cal.

Stone, Earl A., 1111 Washington st., Oakland, Cal.

Maston, B. B., First Nat'l Bank Bldg., Oakland, Cal.

Benton, Julian J., 2108 Shattuck ave., (Shattuck Bldg.) Berkeley.

Dietz, Henry Louis, 1630 8th st., Oakland, Cal.

Duncan, Franklin T., 1353 Broadway, Oakland.

Pardee, Geo. C., Oakland Sav. Bank Bldg., Oakland.

Prather, D. J., 1219 Broadway, Oakland.

Browning, Fred'k W., Haywards, Cal.

Medros, Joseph J., Haywards.

Gates, H. B., San Jose, Cal.

Gates, Amelia L., San Jose, Cal.

Wilson, D. R., San Jose, Cal.

Wintermute, Geo. Preston, Oakland, Cal.

Beetle, Clarence Hollman, Berkeley, Cal.

Deaths.

San Francisco Co.—S. R. Mather.

San Francisco Co.—Herman F. Maleck.

Los Angeles Co.—Orlando T. Pratt.

Alameda Co.—Cyrus Hamilton Allen.

San Diego Co.—George T. Greenleaf, formerly of Redlands, Cal., died in Holtville, Cal.

San Diego Co.—Thos. K. Smith of La Jolla, Cal.

Los Angeles Co.—David M. Goodwin, Los Angeles, Cal.

Los Angeles Co.—Lloyd G. VanScoyoc, Los Angeles, Cal.

San Francisco Co.—Walter F. Percival, San Francisco.

Amador Co.—Benj. T. Freshman, Amador City, Cal.